



# South Carolina Criminal Justice Academy

## *Certification & Compliance P.O.S.T. Letter*



**Date:**

**P.O.S.T. Director Name:**

**P.O.S.T. Agency Name:**

**Address:**

**City/State/Zip:**

**Re:**

**SSN:**

**DOB:**

Dear

The above referenced candidate has applied for certification as a law enforcement officer with  
(Police or Sheriff's Office) in South Carolina and presented documentation of training and certification  
from your state.

In support of the South Carolina Law Enforcement Training Act, Section 23-23-60, the state of South  
Carolina requests the following information from your state to process the candidate's application:

- On what date was the above named individual certified as a law enforcement officer in your state?  
\_\_\_\_\_
- Is he/she still serving as a law enforcement officer in your state, if not, when did he/she separate or  
terminate employment? \_\_\_\_\_
- Is he/she currently eligible to serve as a law enforcement officer in your state? \_\_\_\_\_
- Was he/she ever decertified as a law enforcement officer due to misconduct? \_\_\_\_\_

I certify that there is no reason to deny law enforcement certification in South Carolina.

**Print Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please complete and return this form to the mailing address listed below. Your prompt response will allow  
the above candidate to begin his/her certification process. Please contact the Certification & Compliance  
Unit at (803)896-7802 if you should have any questions.

Sincerely,

Hubert F. Harrell  
Director

**5400 Broad River Road, Columbia, South Carolina 29212-3540**

Phone: (803) 896-7802 Fax: /803) 896-7803

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